

## PCT

## REQUEST

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

<b>PCT/CA 2004/000666</b> International Application No. <b>30 APRIL 2004 30.04.04</b> International Filing Date <b>RO/CA</b> Name of receiving Office and "PCT International Application" Applicant's or agent's file reference (if desired) (12 characters maximum) 08897800WO	
<b>Box No. I TITLE OF INVENTION</b> Improved Extraction And Purification Method For Cereal $\beta$ -Glucan	
<b>Box No. II APPLICANT</b> <input type="checkbox"/> This person is also inventor Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) Ceapro Inc. 4046 EDC, University of Alberta 8303 - 114 Street Edmonton, Alberta T6G 2E1 CANADA Telephone No. 780 - 421-4555 Facsimile No. 780 - 421-1320 Teleprinter No. Applicant's registration No. with the Office	
State (that is, country) of nationality: CA	State (that is, country) of residence: CA
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input checked="" type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
<b>Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)</b> Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) REDMOND, Mark J. 1160492 Avenue Edmonton, Alberta T6C 1B3 CANADA This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (if this check-box is marked, do not fill in below.) Applicant's registration No. with the Office	
State (that is, country) of nationality: CA	State (that is, country) of residence: CA
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
<input checked="" type="checkbox"/> Further applicants and/or (further) inventors are indicated on a continuation sheet.	
<b>Box No. IV AGENT OR COMMON REPRESENTATIVE: OR ADDRESS FOR CORRESPONDENCE</b> The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as: <input checked="" type="checkbox"/> agent <input type="checkbox"/> common representative	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) ERRATT, Judy A.; COLTON, Ian J.; SECHLEY, Konrad; SCHROEDER, Hans, WADA, Ikuko; SMITH, Dallas Gowling Lafleur Henderson LLP 160 Elgin Street, Suite 2600 Ottawa, Ontario Canada K1P 1C3	Telephone No. (613) 233-1781 Facsimile No. (613) 563-9869 Teleprinter No. Agent's registration No. with the Office
<input type="checkbox"/> Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.	

<b>Continuation of Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)</b> <i>If none of the following sub-boxes is used, this sheet should not be included in the request.</i>	
Name and address: <i>(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)</i>  FIELDER, David A. 9911-68 Street Edmonton, Alberta T6A 2S6 CANADA	This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only <i>(If this check-box is marked, do not fill in below.)</i>  Applicant's registration No. with the Office
State <i>(that is, country)</i> of nationality: CA	State <i>(that is, country)</i> of residence: CA
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
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State <i>(that is, country)</i> of nationality:	State <i>(that is, country)</i> of residence:
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